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Bib Data Sheet

CONFIRMATION NO. 7166

|   |   |                                   |   |  |                                |
|---|---|-----------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/751,467  | <b>FILING DATE</b><br>12/29/2000<br><b>RULE</b>   | <b>CLASS</b><br>379               | <b>GROUP ART UNIT</b><br>2642   | <b>ATTORNEY DOCKET NO.</b><br>13039RRUS01U |                                |
| <b>APPLICANTS</b><br>Robert B. Turnbull, Calgary, CANADA;   |   |                                   |   |  |                                |
| <b>** CONTINUING DATA *****</b><br><i>NO</i>  |   |                                   |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>NO</i>   |   |                                   |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/26/2001</b>  |   |                                   |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature <i>[Signature]</i> Initials <i>[Signature]</i> |   | <b>STATE OR COUNTRY</b><br>CANADA | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>21                  | <b>INDEPENDENT CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>Garlick & Harrison<br>P.O. Box 670007<br>Dallas, TX 75367   |   |                                   |   |  |                                |
| <b>TITLE</b><br>Control of echo return loss on a PC based IP telephone  |   |                                   |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1018  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |